Abbreviated Overview of 2020 PCMH Annual Reporting (AR) Requirements and Comparison to 2019



Requirement	Documentation/Evidence	Δ from 2019			
Team-Based Care and Practice Organization (AR-TC)					
AR–TC 01: Pre-Visit Planning Activities	Indicate how you anticipate/plan for visits (check off items in a list provided)				
Knowing and Managing Your Patients (AR-KM)					
AR–KM 01: Proactive Reminders	 Yes or No to reminding patients of ≥ 3 service categories Identify frequency for service categories 				
AR-KM 02: Depression Screenings	 Identify tool used for depression screening. Enter number of patients screened (numerator), eligible (denominator definition and #), and reporting period. Attestation regarding NQF quality measurement (recognition status not affected) 	NEW			
Patient-Centered Access and Continuity (AR-AC)					
AR-AC 01: Access Needs and Preferences	Identify how practice monitors access needs and preferences Identify access categories assessed for sufficiency of meeting patient needs	NEW			
AR–AC 02: Access for Patients Outside Business Hours	Identify how practice provides clinical advice by telephone outside business hours Identify how practice provides access to patients outside	NEW			
Care Management and Suppor	business hours				
AR-CM 01: Patients for Care Management	Indicate criteria used to identify patients (list provided) Enter number of unique patients identified (numerator), patients at practice (denominator), reporting period, and attribution definition for denominator.	Same required items. Regrouping.			
AR-CM 02: Care Plans for Care Managed Patients	 Identify how practice develops care plans Identify how practice provides access to written care plan 	NEW			
	ransitions (AR-CC): Report AC-CC 1-3 and one of the options (AR-CC 4	4-5)			
AR–CC 01: Care Coordination Processes	Indicate which written processes are used in list provided	Changed from Yes/No			
AR–CC 02: Referral Management Process	Attest to practice processes for referrals and tracking	NEW			
AR–CC 03: Care Coordination with Other Facilities Process	 Attest to practice processes for external facilities coordination Attestation regarding an Admissions, Discharge, and Transfer system (recognition status not affected) 	NEW			
AR–CC 04: Lab and Imaging Test Tracking	Enter number of lab reports received (numerator), number ordered (denominator) and reporting period Enter number of imaging reports received (numerator), number ordered (denominator) and reporting period	Formerly AR- CC 03			
OR AR–CC 05: Referral Tracking	OR Enter number of referral reports received (numerator), number ordered (denominator) and reporting period	Formerly AR- CC 04			
Performance Measurement and Quality Improvement (AR-QI): AR-QI 1-4 are required; AR-QI 5-6 informational					
AR-QI 01: Clinical Quality Measures	Upload Quality Improvement Worksheet or alternative report showing at least 3 measures across 3 of the categories	Changed # of measures			
AR–QI 02: Resource Stewardship Measures	Identify methods of care coordination used to collect data Identify categories of measures affecting health care costs Upload QI Worksheet or report that shows at least 1 measure	Slight revision			
AR–QI 03: Patient Experience Feedback	 Identify categories used in patient experience measurement Upload QI Worksheet or report that shows at least 1 measure 	Added categories			
AR-QI 04: Monitoring Access	Identify how practice monitors demand for appointments	NEW			
AR-QI 05: 5 eCQMs (Informational)	Identify whether practice has capability to submit eCQMs	NEW			
AR-QI 06: Value-Based Payment Agreement (Informational)	 Identify whether the practice participates in value-based payment Identify source and lists of payers 	NEW			
Special Topic: Social Determin	nants of Health (AR-SD) Informational: Answer all informational queries	S			



Crosswalk: Annual Reporting Requirements vs. PCMH Criteria

AR Requirements			PCMH Criteria	
Team-Based Care and Practice Organization (TC)				
AR-TC 1: Patient Care Team Meetings	Required	TC 06	Core	
Knowing and Managing Your Patients (KM)				
AR-KM 1: Proactive Reminders	Required	KM 12	Core	
AR-KM 2: Depression Screenings	Required	KM 03	Core	
Patient-Centered Access and Continuity (AC)				
AR-AC 1: Access Needs and Preferences	Required	AC 01	Core	
AR-AC 2: Access for Patients Outside Business Hours	Required	AC 03 AC 04	Core	
Care Management and Support (CM)				
AR-CM 1: Identifying and Monitoring Patients for Care Management	Required	CM 01 CM 03	Core	
AR-CM 2: Care Plans for Care Managed Patients	Required	CM 04 CM 05	Core	
Care Coordination and Care Transitions (CC)				
AR-CC 1: Care Coordination Process	Required	CC 01	Core	
AR-CC 2: Referral Management Process	Required	CC 04	Core	
AR-CC 3: Care Coordination With Other Facilities Process	Required	CC 14 CC 15 CC 16	Core	
AR-CC 4: Lab and Imaging Test Tracking	Option	CC 01	Core	
AR-CC 5: Referral Tracking	Option	CC 04	Core	
Performance Measurement and Quality Improvement (QI)				
AR-QI 1: Clinical Quality Measures	Required	QI 01 QI 08	Core	
AR-QI 2: Resource Stewardship Measures	Required	QI 02 QI 09	Core	
AR-QI 3: Patient Experience Measures	Required	QI 04 QI 11	Core	
AR-QI 4: Monitoring Access	Required	QI 03 QI 10	Core	
AR-QI 5: eCQMs	Informational	N/A	N/A	
AR-QI 6: Value-Based Payment Agreement	Informational	QI 19	Elective	
Special Topic: Social Determinants of Health		LKM 020		
AR-SD 1: Collection and Assessment of SDoH Data	Informational	KM 02G KM 07 KM 21 CM 01D	Core Core Elective Core	
AR-SD 2: Use of Care Interventions and Community Resources	Informational	KM 07 KM 26	Elective Elective	
AR-SD 3: Care Interventions and Community Resources Assessment	Informational	KM 27	Elective	